Montana Medicaid - Fee Schedule Denturist August 1, 2011

Definitions:

Modifier – When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.

For example:

EP = EPSDT service (Early Periodic Screening Diagnosis and Treatment)

Description – Procedure code description. You must refer to the appropriate official CPT-4, HCPCS or CDT-5 coding manual for complete definitions in order to assure correct coding.

Effective – This is the first date of service for which the listed fee is applicable.

Method – Source of fee determination

Fee Sched: Based on Relative Value for Dentists (RVD) X Montana Medicaid Dental Conversion Factor. Conversion factor for fiscal year 2012 is \$31.27.

Medicare: Medicare-prevailing fee.

By Report (BR): Equals 85% of billed charges for CDT codes.

Anes Value: Number of anesthesia base value units

RBRVS: Based on Medicare Relative Value Units (RVU's) x Montana Medicaid conversion factor x policy adjuster

Global - Global surgery indicator. Global surgery periods are pre- and post-operative time frames assigned to surgical procedures.

Space: Global concept does not apply to this code

000: Same day as procedure

010: Same day and ten days following procedure

090: One day prior to and ninety days following procedure

MMM: In maternity cases, the usual global period does not apply

PA – Prior Authorization

Y: Prior authorization is required

Space: Prior authorization is not required

Relative Values for Dentists (RVD) - copyright 2006. Published by Relative Value Studies, Inc. Broomfield Colorado
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Proc	Mod	Description	Effective	Method	Fees	PA	Min Age	Max age	Notes
D0140		LIMIT ORAL EVAL PROBLM FOCUS	8/1/2011	FEE SCHED	\$31.27		000	999	Letticle to the formation of the American Occasion
D0150		COMPREHENSVE ORAL EVALUATION	8/1/2011	FEE SCHED	\$31.27		000	999	Initial visit for new clients; Adults 1 every 3 years
D0330		DENTAL PANORAMIC FILM	8/1/2011	FEE SCHED	\$50.03		000	999	Adults 1 film every 3 years
D0470		DIAGNOSTIC CASTS TEMPORARY- FRACTURED TOOTH	8/1/2011	FEE SCHED	\$39.09		000	020	
D2970 D5110			8/1/2011	FEE SCHED	\$153.22 \$781.75		000	999	Dorticles 1 every 5 years if leaty Fulls 1 every 10 years if leaty Call to yerify
D5110 D5120		DENTURES COMPLETE MAXILLARY DENTURES COMPLETE MANDIBLE	8/1/2011	FEE SCHED	\$761.75 \$781.75		000 000	999	Partials: 1 every 5 years if lost; Full: 1 every 10 years if lost; Call to verify.
			8/1/2011	FEE SCHED	\$859.93			999	Partials: 1 every 5 years if lost; Full: 1 every 10 years if lost; Call to verify.
D5130		DENTURES IMMEDIAT MAXILLARY DENTURES IMMEDIAT MANDIBLE	8/1/2011	FEE SCHED	•		000	999	Partials: 1 every 5 years if lost; Full: 1 every 10 years if lost; Call to verify.
D5140			8/1/2011	FEE SCHED	\$859.93 \$531.59		000	999	Partials: 1 every 5 years if lost; Full: 1 every 10 years if lost; Call to verify.
D5211 D5212		DENTURES MAXILL PART RESIN DENTURES MAND PART RESIN	8/1/2011 8/1/2011	FEE SCHED	\$553.48		000 000	999 999	Partials: 1 every 5 years if lost; Full: 1 every 10 years if lost; Call to verify.
D5212 D5213		DENTURES MAXILL PART METAL	8/1/2011	FEE SCHED					Partials: 1 every 5 years if lost; Full: 1 every 10 years if lost; Call to verify.
D5213 D5214		DENTURES MANDIBL PART METAL DENTURES MANDIBL PART METAL	8/1/2011 8/1/2011	FEE SCHED	\$938.10		000 000	999	Partials: 1 every 5 years if lost; Full: 1 every 10 years if lost; Call to verify.
D5214 D5225		MAXILLARY PART DENTURE FLEX	8/1/2011 8/1/2011	FEE SCHED	\$938.10 \$666.05		000	999 999	Partials: 1 every 5 years if lost; Full: 1 every 10 years if lost; Call to verify. Partials: 1 every 5 years if lost; Full: 1 every 10 years if lost; Call to verify.
D5225 D5226		MANDIBULAR PART DENTURE FLEX	8/1/2011	FEE SCHED	\$666.05		000	999	Partials: 1 every 5 years it lost, Full: 1 every 10 years it lost, Call to verify.
D5220 D5410		DENTURES ADJUST CMPLT MAXIL	8/1/2011	FEE SCHED	\$37.52		000	999	First 3 adjustments after placement are included in denture price
D5410 D5411		DENTURES ADJUST CMPLT MAND	8/1/2011	FEE SCHED	\$37.52 \$37.52		000	999	First 3 adjustments after placement are included in denture price
D5411		DENTURES ADJUST PART MAXILL	8/1/2011	FEE SCHED	\$37.52		000	999	First 3 adjustments after placement are included in denture price
D5421		DENTURES ADJUST PART MANDBL	8/1/2011	FEE SCHED	\$37.52		000	999	First 3 adjustments after placement are included in denture price
D5422		DENTUR REPR BROKEN COMPL BAS	8/1/2011	FEE SCHED	\$93.81		000	999	First 3 adjustments after placement are included in defiture price
D5510 D5520		REPLACE DENTURE TEETH COMPLT	8/1/2011	FEE SCHED	\$62.54		000	999	
D5610		DENTURES REPAIR RESIN BASE	8/1/2011	FEE SCHED	\$93.81		000	999	
D5620		REP PART DENTURE CAST FRAME	8/1/2011	FEE SCHED	\$128.21		000	999	
D5630		REP PARTIAL DENTURE CLASP	8/1/2011	FEE SCHED	\$115.70		000	999	
D5640		REPLACE PART DENTURE TEETH	8/1/2011	FEE SCHED	\$93.81		000	999	
D5650		ADD TOOTH TO PARTIAL DENTURE	8/1/2011	FEE SCHED	\$93.81		000	999	
D5660		ADD CLASP TO PARTIAL DENTURE	8/1/2011	FEE SCHED	\$156.35		000	999	
D5710		DENTURES REBASE CMPLT MAXIL	8/1/2011	FEE SCHED	\$312.70		000	999	
D5711		DENTURES REBASE CMPLT MAND	8/1/2011	FEE SCHED	\$312.70		000	999	
D5720		DENTURES REBASE PART MAXILL	8/1/2011	FEE SCHED	\$250.16		000	999	
D5721		DENTURES REBASE PART MANDBL	7/1/2009	FEE SCHED	\$262.00		000	999	
D5730		DENTURE RELN CMPLT MAXIL CH	8/1/2011	FEE SCHED	\$187.62		000	999	
D5731		DENTURE RELN CMPLT MAND CHR	8/1/2011	FEE SCHED	\$187.62		000	999	
D5740		DENTURE RELN PART MAXIL CHR	8/1/2011	FEE SCHED	\$156.35		000	999	
D5741		DENTURE RELN PART MAND CHR	8/1/2011	FEE SCHED	\$156.35		000	999	
D5750		DENTURE RELN CMPLT MAX LAB	8/1/2011	FEE SCHED	\$250.16		000	999	
D5751		DENTURE RELN CMPLT MAND LAB	8/1/2011	FEE SCHED	\$250.16		000	999	
D5760		DENTURE RELN PART MAXIL LAB	8/1/2011	FEE SCHED	\$250.16		000	999	
D5761		DENTURE RELN PART MAND LAB	8/1/2011	FEE SCHED	\$250.16		000	999	
D5820		DENTURE INTERM PART MAXILL	8/1/2011	FEE SCHED	\$312.70		000	020	
D5821		DENTURE INTERM PART MANDBL	8/1/2011	FEE SCHED	\$312.70		000	020	
D5850		TISSUE CONDITIONING, MAXILLARY	8/1/2011	FEE SCHED	\$81.30		000	999	Payment of denture includes payment of any tissue conditioners
D5851		TISSUE CONDITIONING, MANDIBULAR	8/1/2011	FEE SCHED	\$81.30		000	999	Payment of denture includes payment of any tissue conditioners
D5899		REMOVABLE PROSTHODONTIC PROC	8/1/2011	BY REPORT	\$0.00		000	999	, , ,

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D6930	DI	ENTAL RECEMENT BRIDGE	8/1/2011	FEE SCHED	\$62.54		000	020	
D6980	ВІ	RIDGE REPAIR	8/1/2011	FEE SCHED	\$162.60		000	020	
D9410	DI	ENTAL HOUSE CALL	8/1/2011	FEE SCHED	\$93.81		000	999	Bill 1 site per day even when seeing multiple clients
D9940	DI	ENTAL OCCLUSAL GUARD	8/1/2011	FEE SCHED	\$312.70		000	020	